

**DOMESTIC
BUSINESS CORPORATION**

STATE OF MAINE

**CHANGE OF CLERK and/or
REGISTERED OFFICE**

Deputy Secretary of State

A True Copy When Attested By Signature

Deputy Secretary of State

(Name of Corporation)

Pursuant to [13-C MRSA §501](#), the undersigned corporation executes and delivers the following Change of Clerk and/or Registered Office:

FIRST: ("X" one box only.)

- A.** ☐ change of registered office only **B.** ☐ change of clerk and registered office
C. ☐ change of clerk only **D.** ☐ change in name of current clerk

SECOND: The name and registered office of the clerk appearing on the record in the Secretary of State's office:

(name of current clerk)

(street, city, state and zip code)

THIRD: Complete this Item as follows based on your selection in Item First:

- A.** The address of the new registered office (provide address information only);
B. The name and registered office of the **new** clerk, who must be a Maine resident (provide name and address information);
C. The name of the **new** clerk, who must be a Maine resident (provide name only); **OR**
D. The new name of the current clerk (provide name only).

(name of new clerk or new name of current clerk)

(physical location, not P.O. Box – street, city, state and zip code)

(mailing address if different from above)

FOURTH: Upon a change in clerk, one of the following must be completed: ("X" one box only.)

- ☐ The change of clerk was duly authorized by the board of directors of the corporation and that the power to appoint the clerk is not reserved to the shareholders by the articles or the bylaws.
☐ The change of clerk was duly authorized by the shareholders of the corporation.

FIFTH: The undersigned clerk of the following corporation(s), who has changed the address of the registered office **OR** who has changed his or her name, has notified each corporation of the change indicated in Item Third A or D:

Name of Corporation

☐ Names of additional corporations attached hereto as Exhibit ____, and made a part hereof.

Note: The following **must be signed** by the proper person as designated below.*

DATED _____

*By _____
(signature)

(type or print name and capacity)

Acceptance of Appointment of New Clerk

The undersigned hereby accepts the appointment as clerk for the above-named domestic business corporation.

DATED _____

(signature of clerk)

(type or print name)

Note: If this document changes the clerk and the **new clerk does not sign**, Form MBCA-18 ([§501.3](#)) must accompany this document.

*This document **MUST** be signed as follows:

- (1) if Item First, A. was selected, then by the Clerk **OR**
- (2) if Item First, B. was selected, then by any duly authorized officer or the Clerk **OR**
- (3) if Item First, C. was selected, then by any duly authorized officer or the Clerk **OR**
- (4) if Item First, D. was selected, then by the Clerk.

Please remit your payment made payable to the Maine Secretary of State.

**SUBMIT COMPLETED FORMS TO: CORPORATE EXAMINING SECTION, SECRETARY OF STATE,
101 STATE HOUSE STATION, AUGUSTA, ME 04333-0101**